

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		0-20-01
O.I.P.E. CLASSIFIER	LD	32	6/27
FORMALITY REVIEW	BZ	SC3-383	08-10-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
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25	✓	✓	
26	0	=	
27	0	=	
28	✓	✓	
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34	✓	✓	
35	✓	✓	
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If more than 150 claims or 10 actions  
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